

EMPLOYMENT CONTACT FORM

First Name _____ Last Name _____

Phone Number (_____) _____

Email _____

Address _____

POSITION OF INTEREST (Check all that apply)

Waitstaff _____ Cook _____ Dishwasher _____

House-keeping Staff _____ Gift Shop Clerk _____

Motel Desk _____ Outdoor/Landscape _____

WHEN CAN YOU START? (Check One)

May _____ June _____ July _____ August _____

WHEN CAN YOU WORK UNTIL? (Check One)

July _____ August _____ September _____ October _____